

## **Application Data Sheet**

### **Application Information**

Application Type::	Regular
Subject Matter::	Utility
Suggested Group Art Unit::	N/A
CD-ROM or CD-R?::	None
Sequence submission?::	None
Computer Readable Form (CRF)?::	No
Title::	OBJECT-ORIENTED DATA TRANSFER SYSTEM FOR DATA SHARING
Attorney Docket Number::	MWS-035
Request for Early Publication?::	No
Request for Non-Publication?::	Yes
Total Drawing Sheets::	10
Small Entity?::	No
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

### **Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Loren
Family Name::	Dean
City of Residence::	Hopedale
State or Province of Residence::	MA
Country of Residence::	US
Street of mailing address::	21 Haven Way
City of mailing address::	Hopedale
State or Province of mailing address::	MA
Postal or Zip Code of mailing address::	01747

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Robert  
Family Name:: DeSonia  
City of Residence:: Kihei  
State or Province of Residence:: HI  
Country of Residence:: US  
Street of mailing address:: 14 Hui Nene Way  
City of mailing address:: Kihei  
State or Province of mailing address:: HI  
Postal or Zip Code of mailing address:: 96753

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: John  
Family Name:: Holohan  
City of Residence:: Newton Centre  
State or Province of Residence:: MA  
Country of Residence:: US  
Street of mailing address:: 26 Walnut Hill Road  
City of mailing address:: Newton Centre  
State or Province of mailing address:: MA  
Postal or Zip Code of mailing address:: 02459

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Christian  
Family Name:: Portal

City of Residence:: Holliston  
State or Province of Residence:: MA  
Country of Residence:: US  
Street of mailing address:: 397 Gorwin Drive  
City of mailing address:: Holliston  
State or Province of mailing address:: MA  
Postal or Zip Code of mailing address:: 01746

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Dave  
Family Name:: Tarkowski  
City of Residence:: Framingham  
State or Province of Residence:: MA  
Country of Residence:: US  
Street of mailing address:: 69 Walsh Street  
City of mailing address:: Framingham  
State or Province of mailing address:: MA  
Postal or Zip Code of mailing address:: 01701

#### **Correspondence Information**

Correspondence Customer Number:: 00959

#### **Representative Information**

Representative Customer Number:: 00959